PTO/SB/01 (10-01) Approved for use through 10/31/2002 OMB 0651-0032

(if applicable).

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMS control number P-1165 Attorney Docket Number DECLARATION FOR UTILITY OR Peter Wu First Named Inventor DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number Filing Date X_ Declaration Declaration Submitted after Initial Submitted Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filina Examiner Name required) As the below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled WEIGHT LIFTING EXERCISER (Title of the Invention) the specification of which X is attached hereto was filed on (MM/DD/YYYY) as United States Application Number or PCT International

and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

Application Number

l acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

Thereby dates foreign priority benefits under 35 U.S.C. 119(s)-(d) or (f), or 355(b) of any foreign application(s) for patent, inventor's or plant breader grists contribate(s), or 355(d) of any PCT international application which designated at least one commonly other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breader grists certificate(s), or any PCT international application having a filing date before that of the application on which priority is

Country	(MM/DD/YYYY)	Not Claimed	YES	NO .
			l Ħ	П
				П
				\Box
	Country	Country (MM/DD/YYYY)	Country (MM/DD/YYYY) Not Claimed	Country (MM/DD/YYYY) Not Claimed YES

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, US Patient and Tradedmark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO. Assistant Commissioner for Patients, Washington, DC 20231.

PTO/SB/01 (10-01) Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. Department of use through not recognized to use through not recognized. Who does not use through not recognized to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Utility or Design Patent Application DECLARATION Customer Number Direct all correspondence to: OR X Correspondence address below or Bar Code Label Kuo-Hsiung Chiu Name 13F., No. 23, Jiun-Ho Street, Peitun District Address 406 Taichung 7IP City State Fax 886-4-22980375 886-4-22989621 TATWAN Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor Given Name Family Name Peter Wu (first and middle [if any]) or Sumame , lun Date Feb 20, 2002 Inventor Signature TAIWAN TAIWAN Taiping State Country Citizenship Residence: City No. 1, Lane 233, Sec. 2, Charng Long Rd. Mailing Address Country TAIWAN 411 Taiping 7IP NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name Family Name Wang Leac (first and middle (if anyl) or Surname Date Feb 20, 2002 Inventor WSV Signature TAIWAN TATWAN Taiping Residence: City State Country Citizenship No. 1, Lane 233, Sec. 2, Charng Long Rd. Mailing Address

State

Taiping

Additional inventors are being named on the _

City

411

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

TAIWAN

Country

PTOSSIDE (12-3)

Approved for use through 93000 0889 to 51.0031

Approved for use through 93000 0889 to 51.0031

Palent and Trademark Office: U.S. DEPARTMENT OF COMMERCE ter the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of thromston unless it displays a valid Orient number

ATEMENT CLAIMING SMA 7 CFR 1.9(f) & 1.27(b))IND	LL ENTITY STATUS EPENDENT INVENTOR	Docket Number (Optional) P-1165
Applicant, Patentee, or Identifier: Pe	ter Wu & Leao Wang	
Application or Patent No		
Filed or Issued:		
Title: Weight Lifting Exe	· .	
Title:	*	
As a below named inventor, I herel for purposes of paying reduced fee	oy state that I qualify as an independent s to the Patent and Trademark Office de	inventor as defined in 37 CFR 1 9(c) escribed in:
X the specification filed herew	rth with title as listed above.	
the application identified abo	ove.	
the patent identified above		
grant, convey, or license, any rights under 37 CFR 1 9(c) if that person	eyed, or licensed, and am under no obli in the invention to any person who would had made the invention, or to any cond .9(d) or a nonprofit organization under 3	not qualify as an independent inventor ern which would not qualify as a small
Each person, concern, or organiza obligation under contract or law to	ation to which I have assigned, granted, assign, grant, convey, or license any ri	conveyed, or licensed or am under an ghts in the invention is listed below.
No such person, concern	, or organization exists.	•
Each such person, conce	ern, or organization is listed below.	
stating their status as small entition	es. (37 CFR 1.27) his application or patent, notification of a	ganization having rights to the invention any change in status resulting in loss of ig. the earliest of the issue fee or any
maintenance fee due after the da	te on which status as a small entity is no	o longer appropriate (37 CFR 1 28(b))
Leao Wang	Peter Wu	
NAME OF INVENTOR	NAME OF INVENTOR	NAME OF INVENTOR
Signature of inventor	Signature of inventor	Signature of inventor
February 20, 2002	February 20, 2002	2.1.
Date	Date .	Date

Burden Hour Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to fine Chief Information Officer. Patient and Trademark Office Washington DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO Assistant Commissioner for Patients, Washington DC 20231.